# CITY OF FITCHBURG EMPLOYEE BENEFIT SUMMARY



2021

# Your Needs. Your Benefits.

The City of Fitchburg offers a comprehensive benefits package to meet the diverse needs of our employees. The City contributes towards the cost of several benefit plans, which is a valuable piece of your total compensation. It is only through the understanding of your available benefits options that you are able to get the most out of your benefit programs.

#### **About this Summary**

This benefit summary is a high-level overview of the City of Fitchburg employee benefits and is not intended to be a complete description of coverage. For more detailed information, forms and guides/booklets please contact Human Resources at 608-270-4211.

Every effort has been made to ensure the information in this benefit summary is true and accurate. If there is any discrepancy between this summary and the official plan documents, the language in the official documents shall be considered accurate.

# Employee Benefit Summary

YOUR NEEDS. YOUR BENEFITS.

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#### **Enrollment Deadlines and Effective Dates**

Most benefit plans have a 30 day enrollment period from your hire date. Benefits are typically effective on the first of the month following the receipt of your application, provided all WRS service requirements are met.

# **Dependent Coverage**

Your spouse and children are eligible for all benefit plans that offer coverage to dependents.

#### Life Events

During the course of your employment, you may have life events such as marriage, birth or adoption, employment changes or termination of employment. You typically have 30 days from a life event to make changes to your benefits. You should contact Human Resources as soon as a life event occurs.

# WISCONSIN RETIREMENT SYSTEM (WRS)

The Wisconsin Retirement System provides retirement (pension) benefits to City employees and to most public employees across Wisconsin. If you are eligible for the WRS, coverage is mandatory and you will be enrolled automatically. The WRS is administered by the Department of Employee Trust Funds (ETF) and investments are managed by the State of Wisconsin Investment Board (SWIB).

## Eligibility

If you do not meet the eligibility requirements below when you are first hired, you will be covered under the WRS once you meet the requirements or are expected to meet the requirements.

If you first became a WRS participating employee on or after July 1, 2011:

You are eligible for the WRS if you are expected to work at least 1,200 hours (58% appointment) and one year.

If you first became a WRS participating employee prior to July 1, 2011:

You are eligible for the WRS if you are expected to work both at least 600 hours (29% appointment) and one year.

## Vesting

If you were first covered by the WRS on or after July 1, 2011, you are fully vested once you have five years of WRS creditable service.

If you had WRS service prior to July 1, 2011, you are immediately vested.

#### **Contributions**

Employees are required to contribute 6.75% of their salary to their WRS account. The City will also contribute 6.75% (11.65% for protective service) of your salary to your WRS account.

Contributions are taken on a pre-tax basis for federal and state income tax purposes.

Contribution rates are set annually by ETF.

#### Core vs. Variable Fund

If you do nothing, your WRS contributions will be invested in the Core Fund - a balanced fund that is fully diversified and has a mixture of holdings (stocks, bonds, real estate, etc.). You may also elect to have 50% of your contributions invested in the Variable Fund - a fund invested solely in stocks. You must complete a Variable Election form if you want to invest in the Variable Fund.

#### Retirement

At retirement, your monthly annuity will be based on a calculation using your years of service and your three highest years of earnings or the cash value of your account, whichever is greater.

You may retire with full benefits:

- General WRS Category Age 65 or at age 57 if you have 30 years of service
- Protective WRS Category Age 54 or at age 53 if you have over 25 years of service

You may retire at age 55 (age 50 for Protective WRS Category) with reduced benefits.

# **Termination of Employment**

If you terminate employment before minimum retirement age or before you are vested, you may take a separation benefit. A separation benefit includes your employee contributions and interest on those contributions. If you take a separation benefit, the employer contributions and your years of service are forfeited.

If you are vested and leave employment before minimum retirement age, you may take a separation benefit or leave your money in your WRS account and take a retirement benefit when you are minimum retirement age.

#### Other Benefits

The Wisconsin Retirement System also provides benefits in the event of your death or disability.

#### HEALTH INSURANCE

The City of Fitchburg participates in the State of Wisconsin Public Employers Group Health Insurance Plan, which is administered by the Department of Employee Trust Funds (ETF). This plan provides coverage mainly in Wisconsin, with one option available for nationwide coverage. The plan offers hospital, surgical, medical, and prescription coverage.

Employees are eligible to participate in the health insurance program if they are eligible for the Wisconsin Retirement System (WRS). Coverage is available for employees, as well as spouse and any eligible children.

# **Coverage Options**

There are two health plan designs available for employees to choose from, It's Your Choice (IYC) Local Traditional Health Plan and It's Your Choice (IYC) Local Access Health Plan.

It's Your Choice (IYC) Local Traditional Health Plan - You choose from a variety of health plan providers that offer the same uniform benefits package. This is the most popular plan option among City employees.

It's Your Choice (IYC) Local Access Health Plan (formerly the Standard Plan) - Provides freedom of choice for doctors and hospitals across the county. In exchange for the increased flexibility in medical providers, the member's monthly premium cost is more than the traditional health plan.

2021 Monthly Employee Premium					
Health Plan	General Employees & Police		General Employees & Police Local 311 & Supervi		& Supervisors
(Plans qualified in Dane County)	Single Family		Single	Family	
IYC	IYC Local Traditional Plan				
Dean Health Plan	\$122.85	\$302.69	\$106.39	\$264.11	
GHC of South Central Wisc.	\$95.09	\$233.29	\$78.63	\$194.71	
Quartz – UW Health	\$52.07	\$125.75	\$35.61	\$87.17	
IYC Access Health Plan					
Access Health Plan – Dane	\$529.01	\$1318.09	\$512.55	\$1279.51	

Additional health plan options are available under the traditional plan for employees residing outside of Dane County, or those that prefer to doctor outside of Dane County. For a complete list of health plan options, available by County, visit the ETF website at: Local Traditional Health Plan (PO12) | ETF (wi.gov)

**Part-time Employee Premiums** – Health insurance premiums for eligible part-time employees (less than 40 hours per week for general employees or 37.50 hours per week for Police Officers and Dispatchers) is based upon the plan selected and your FTE status. Contact Human Resources for more information.

# **Summary of Health Insurance Benefits**

This information will help you compare the benefits available through the different It's Your Choice (IYC) health plan design options. This list contains the most commonly used benefits. Complete information is available online at <a href="https://www.etf.wi.gov.">www.etf.wi.gov.</a>.

This chart compares your medical benefit options. This is not a complete description of coverage, you can find that in the <a href="Certificates of Coverage">Certificates of Coverage</a>.

Benefit	IYC Local Traditional Plan	IYC Local Access Plan In-Network	IYC Local Access Plan Out-of-Network		
Annual Medical Deductible	No Deductible		No Deductible		\$500 individual/\$1,000 family  When an individual within a family plan meets the \$500 deductible, coinsurance will apply to covered medical services.
Annual Medical Coinsurance and Out of Pocket Limit	medical equipment, certo	t services, except for durable in hearing aids, and cochlear plants.	After deductible: plan pays 80%, you pay 20% coinsurance up to OOPL.		
Annual Medical Maximum Out-of- Pocket Limit (OOPL)	hearing aids, and co individual/\$13,700 fo	e medical equipment, certain ochlear implants. \$6,850 amily for federally required nealth benefits	None		
Routine, preventive services as required by federal law	Plan pays 100%		After deductible plan pays 80%, you pay 20% cost to OOPL		
Illness/Injury related services	Plan pays 100%		After deductible plan pays 80%, you pay 20% cost to OOPL		
Emergency Room Copay (Waived if admitted as an inpatient directly from the ER or for observation of 24 hours or longer.)	\$60 copay per visit		\$75 copayment, the In-Network deductible applies to services after the co-payment.		
Vison Exam	Plan pays 100% for one routine exam per year; plan pays 100% for exams related to illness or injury		Routine exam: No benefit  Illness or injury: After deductible plan pays 80% for adults or children; you pay 20% cost to OOPL		
Hearing Exam	Plan pays 100%		After deductible plan pays 80% only when exam is for illness or disease; you pay 20% cost to OOPL		

	Every 3 years:	Every 3 years:
Hearing Aid (per ear)	Adults: Plan pays 80% up to \$1,000 benefit limit, you pay 20% for the first \$1,000 and the full cost after  Children: Plan pays 100%	Adults: No benefit Children: After deductible, plan pays 80%; you pay 20% cost to OOPL
Durable Medical Equipment	Plan pays 80%, you pay 20% up to \$500 OOPL	After deductible, plan pays 80%; you pay 20% cost to OOPL
Physical/Speech Occupational Therapy	Plan pays 100% for a combined 50 visits per year (amongst all therapies); plan may approve an additional 50 visits per therapy type per year.	After deductible, plan pays 80%; you pay 20% cost to OOPL for a combined 50 visits per year (amongst all therapies); plan may approve an additional 50 visits per therapy type per year
Skilled Nursing Facility (non- custodial care)	Plan pays 100% for 120 days per benefit period	After deductible plan pays 80% for 120 days per benefit period

# **Wellness Incentive**

We could come up with a million reasons why health, fitness, and overall well-being are so important, but instead, we'll start with \$150. After spending about 20 minutes completing a health survey and 20 minutes attending a wellness assessment, you will be eligible for a \$150 health incentive from your health plan. Your spouse is also eligible to receive the full \$150 wellness incentive.

Visit Well Wisconsin for more information.

# **Summary of Prescription Drug Benefits**

The 2021 Pharmacy Benefits Plan Comparison table below shows what amount or percentage you would pay for prescription drugs under each plan. For example, with the IYC Traditional Plan the combined out-of-pocket limit (OOPL), or maximum, you would pay for Levels 1 and 2 drugs is \$600 for individual coverage and \$1,200 for family coverage. All covered prescription drugs fall into one of four cost-sharing levels, including Level 1 for most generic drugs and Levels 2, 3, and 4 for most brand-name drugs. Navitus is the plan administrator.

	IYC Traditional	IYC Access (In-Network)	IYC Access (Out of Network)
Prescription Deductible	No	ne	
Prescription Copay			
Level 1	\$.	5	
Level 2	20% (\$5	0 Max)	
Level 3	40% (\$1	50 Max)	
Level 4 Specialty	\$50		Must use in-network
	(Must be filled at Lumicera or UW Specialty Pharmacies)		Pharmacy
Preventive	Plan Pays: 100%, regardless of deductible		
Out-Of-Pocket Limits	\$600/\$1,200		
Level 1 & 2	Individual/Family		
Level 3	\$6,850/\$13,700		
Level 4	\$1,200/\$2,400		

#### What will my prescriptions cost?

You can easily estimate the cost of your prescriptions by following these three steps.

- Determine what level your drug is on the formulary. Visit <u>www.navitus.com</u> (and log in to the members section) and select "formulary" from the options available. Or, call Navitus with your questions at 1-866-333-2757.
- 2. Find the current cost of your drug on either the paperwork you receive with the prescription or ask your pharmacist.
- 3. Calculate the cost utilizing the chart above.

# FLEXIBLE SPENDING ACCOUNTS (FSA)

Medical and Dependent Care Flexible Spending Accounts (FSA) are designed to allow you to pay for eligible medical and dependent care expenses with tax-free dollars. This reduces your federal tax income, and in most cases, your social security taxes are also reduced. All regular full and part-time staff (working at least 20 hours per week), are eligible to participate in the FSA plan.

During the annual enrollment period (November), you may select the amount to be withheld from each paycheck. The funds are sent to ConnectYourCare and deposited into your Flexible Spending Account (FSA). Annual election amounts may only be changed during the year if you have a Life Event (e.g. marriage, divorce, birth, etc.) Contact Human Resources within 30 days of any event that may be considered a Life Event.

#### Plan Year

The plan year for all FSAs is January 1 - December 31st. Any funds left in your FSA at the end of the plan year will be lost. You may now carryover up to \$500 of unused funds to the following year.

#### **Healthcare FSA**

A Healthcare FSA is used to pay for eligible medical, dental, vision and prescription expenses that aren't covered by your insurance. The Healthcare FSA limit for 2021 is \$2,750. These expenses can be incurred by you, your spouse and your qualifying child or relative. Following is a partial listing of medical expenses which are eligible for reimbursement. Please refer to IRC Section 213(d) for a complete listing of allowed expenses.

Acupuncture Ambulance Chiropractor fees

Coinsurance (co-pays and deductibles for health, dental and vision)

Corrective eye surgery Hearing aids/batteries Orthodontic fees

Prescription eyeglasses, sunglasses, contact lenses Reading Glasses

Many over the counter medications, with a doctor's prescription

# Dependent/Day Care FSA

A Dependent Day Care FSA is used to pay for eligible dependent care expenses such as after school care, baby-sitting fees, adult or child daycare and preschool. Eligible dependents include your qualifying child, spouse and/or relative. The Dependent/Day Care FSA limit for 2021 is \$5000.

Dependent/day care expenses include payments you make for the care of a child under 13 and/or a dependent regardless of age who requires care due to an inability to care for him/herself. For dependents to be eligible, they must be unable to care for themselves and must spend at least 8 hours a day in your home. You must declare them as dependents on your Federal tax return. Reimbursement for amounts cannot be claimed if paid to your spouse, anyone you claim as a tax dependent, or your child under age 19. Any expenses reimbursed through your account cannot be claimed for income tax purposes.

#### **DENTAL INSURANCE**

The City offers dental insurance that provide coverage beyond the coverage available through your State Group health plan. You are eligible for the dental plan if you are a regular full or part-time employee

scheduled to work 30 hours per week or more. Open enrollment will occur in October/November of each year, with coverage effective January 1.

Your dental benefit plan will provide a comprehensive program to ensure your dental health. Coverage is included for important preventative care, and also for treatment needed as a result of dental disease or accidental injury. Your dental benefit handbook provides a thorough explanation of your dental plan, including any limitations or exclusions that might apply.

**2021 Premium**Single - \$4.25/mo.
Family - \$11.74/mo.

A Brief Summary of Benefits		
Service	Delta Premier Benefit	
Lifetime Deductible – applies to Basic Restorative Services	\$25	
Individual Annual Deductible – applies to Major Restorative Services	\$25	
Family Annual Deductible – applies to Major Restorative Services	\$75	
Individual Annual Maximum	\$1200	
Individual Lifetime Orthodontic Maximum	\$1000	
Dependents are covered to age 26		
Diagnostic & Preventive Services	100%	
Examinations, teeth cleaning (prophylaxis), fluoride treatments, space		
maintainers, bitewing & full mouth x-rays		
Basic Restorative Services	80%	
Fillings, root canal & gum disease treatment, extractions and oral surgery,		
sealants		
Major Restorative Services – Type 1	80%	
Crowns, inlays & on-lays		
Major Restorative Services – Type 2	50%	
Complete & partial dentures, fixed bridges		
Repairs & adjustments	80%	
Orthodontics	50%	

#### VISION INSURANCE

DeltaVision is offered through Wyssta Insurance Company, Inc., a wholly-owned subsidiary of Delta Dental of Wisconsin, Inc. Claims processing, claims service and network administration for DeltaVision are handled through an agreement with EyeMed Vision Care, LLC.

# Eligibility

Employees scheduled to work 30 hours per week or more are eligible to enroll themselves, spouse, and children (under the age of 27) in the vision plan. Employees have 30 days from their date of hire to enroll in the vision plan. Coverage is effective the first day of the month following the date the application is received by Human Resources.

**2021 Premium**Single - \$11.70/mo.
Family - \$29.13/mo.

Employees that do not enroll in the vision plan upon hire will have the opportunity to enroll in the plan on an annual basis. Open enrollment will occur in October/November of each year, with coverage effective January 1.

# **Summary of Benefits**

Frames, lenses & Lens Options Allowance (Materials)	\$250	
Or Contact Lenses Allowance (Materials)		
	In-Network Benefit	Out-of-Network Benefit
Exam – with dilation as necessary	N/A	N/A
Frames – Any available frame at provider location.	\$250 allowance,	\$125
Standard Plastic Lenses	then 20% of balance	
-Single vision		
-Bifocal		
-Trifocal		
Lens Options		
-UV coating		
-Tint (solid or gradient)		
-Standard scratch resistance		
-Standard polycarbonate		
-Standard progressive (add-on to bifocal)		
-Standard anti-reflective coating		
-Other Add-ons and services		
Contact Lenses – Includes fit, follow-up and materials	•	
-Conventional	\$250 allowance,	\$200
	then 15% of balance	
-Disposable	\$250 allowance	\$200
-Medically necessary (authorization required)	Paid in full	\$200
Laser Vision Correction — Lasik or PRK	15% off retail price,	None
	or 5% off	
	promotional price	
Frequency - Frames/Lenses or Contact Lenses	Once per 1	2 month period

#### GROUP LIFE INSURANCE

State Group Life Insurance offers coverage levels of up to five times your annual salary. There is also an option to cover your spouse up to \$20,000 and your children up to \$10,000. SGL is the only life insurance plan that is offered to all State of Wisconsin employees. SGL will also continue into retirement at the group policy rates.

You must be covered under the Wisconsin Retirement System and be under age 70 when you first enroll to be eligible for this plan. You have 30 days from your date of hire to enroll.

You may enroll in coverage or increase coverage by one level when you have a new dependent due to a Life Event (ex. birth, marriage).

#### Why Life Insurance Matters

Life insurance is a way to provide for your family after you're gone. Whether you are single and in your 20's, married with kids or are heading into retirement, life insurance can be a way to know your family's future finances are secure. Life insurance can provide your family with the money needed to pay off any debt you may have, cover final financial expenses associated with funerals, cover daycare or college expenses and help ensure future financial stability. See the Life Insurance Needs Calculator for more information.

# INCOME CONTINUATION INSURANCE (ICI)

Income Continuation Insurance is disability/income replacement insurance that will provide you with up to 75% of your monthly salary (based on a maximum salary of \$120,000/year) if you become ill or disabled and are unable to work. The ICI plan is administered by the Department of Employee Trust Funds (ETF) and claims are processed by Aetna.

Employees are eligible for coverage the first day of the calendar month that first occurs during the 30-day enrollment period. There are two levels of coverage under the ICI program:

- Standard ICI covers the first \$64,000 of earnings. The maximum benefit is \$4,000 per month. The City contributes to the premium for standard coverage.
- Supplemental ICI coverage is available to employees whose annual salary exceeds \$64,000, up to a
  maximum of \$120,000. The maximum benefit is \$7,500 per month. You must have standard
  coverage to apply for supplemental coverage. The premiums are paid entirely by the employee.

ICI provides replacement income for disabilities which are short- and long-term. The benefit usually lasts until you are no longer disabled or you reach age 65 (with some exceptions), whichever is sooner. Before the benefit starts, you must serve your waiting period. The waiting period is the number of calendar days in which you must be completely off work. The shortest waiting period is 30 days, the maximum is 180 days.

# EMPLOYEE ASSISTANCE PROGRAM (EAP)

Our free and confidential Employee Assistance Program (EAP) provides assistance with life, work, family and wellbeing. Employee wellbeing is extremely important to us at the City of Fitchburg and we want our employees to take care. Whether you are dealing with depression, stress, anxiety, financial troubles, legal needs, child care resources, workplace conflicts, etc., EAP is there to provide the professional help you need.

Help is available to you and your household, 24/7. You can simply call 1-800-634-6433 OR login to mylifematters.com; password COF1.

The City of Fitchburg also has a Public Safety Wellness team that is focused on providing peer to peer support and critical incident stress management to City staff and other local municipalities. This team consists of Fitchburg Police, Fitchburg Fire, Fitch-Rona EMS, the City's two Chaplains, and a few external experts from UW and Agrace. Please visit their website at <a href="www.firstrespondwell.org">www.firstrespondwell.org</a> to learn more. For immediate psychological/emotional help, call 608-280-2600 or text "Help" to 741-741.

# WISCONSIN DEFERRED COMPENSATION 457 PROGRAM (WDC)

The Wisconsin Deferred Compensation (WDC) Program is a supplemental retirement savings program regulated by Section 457 of the Internal Revenue Code. Through the WDC Program you can invest a portion of your income for retirement on either a pre-tax basis, an after-tax basis (Roth), or a combination of both. Participation in the plan is voluntary. You make the entire contribution; there is no employer match. There is no minimum monthly contribution.

Federal tax law sets forth certain limitations and restrictions that must be followed, including the amount of employee compensation that can be deferred as well as when and how account balances can be distributed. Contribution limits for 2021 are as follows:

- Employees under age 50: \$19,500
- Employees age 50 and above: \$26,000
- Employees within 3 years of normal retirement age and have under-contributed in the past, may be eligible to contribute additional. For more information, please see the WRS section.

Employees enrolled in the WDC elect how their contributions will be invested. There are multiple options available, including: Target Date Funds, Advisory Services, and Self-Directed Brokerage. Contact Wisconsin Deferred Compensation for a complete list of investment options.

Accounts will be assessed participant fees. These fees fund the program administration, State funds are not used for the administration of the WDC.

# PAID LEAVE

Regular full and part-time employees are eligible to earn leave. If you are less than 100% time, your leave hours will be pro-rated based on your appointment percentage. Paid leave is allocated on a calendar year basis. Represented Police and Fire employees should refer to their collective bargaining agreement, available on the City of Fitchburg website, for information related to paid leave.

	Annual Vacation Schedule Vacation Banking Schedule			
Years of Service	Non-Exempt	Exempt	Non-Exempt	Exempt
Less than 5 years	80 hrs.	120 hrs.	0 hrs.	60 hrs.
Upon Completion of 5 years	120	160	60	80
Upon completion of 12 years	160	180	80	80
Upon Completion of 20 years	200	200	80	80
Upon Completion of 25 years	200	220	80	80

Vacation	Regular full and regular part- time employees, working at least twenty (20) hours per week, are eligible for paid vacation time off. The amount of vacation earned is based on your years of continuous service per the schedule above. Employees may carry-over up to one work-week of vacation time into the following calendar year.
Sabbatical Bank	Non-represented employees have the option to bank earned vacation time that has not been used during the course of the calendar year. Sabbatical leave may only be taken once per three (3) years, and may not exceed a total time off of more than three (3) months, combined paid or unpaid leave. Vacation time that has been banked as sabbatical will only be paid out upon retirement, termination of employment, death, or permanent disability.
Sick Leave	Regular full-time employees earn 4 hours of sick leave each bi-weekly pay period (pro-rated for regular part-time employees). This accrual begins on the first day of employment; however, sick leave cannot be used until it has been earned. Sick leave can be used to cover all absences, which result from bonafide illness of the employee, or of an immediate family member (as defined in the bereavement policy), or from the employee's compliance with any quarantine regulations imposed by health authorities. Sick leave may also be used for any regularly scheduled doctor or dental appointment.
Personal Days	You will be given 20 hours of paid personal time per calendar year. Personal time does not carry over to the next calendar year.
Holidays	City Hall is closed for the following recognized holidays: New Year's Day (January 1st), Martin Luther King Jr. Day (3rd Monday in January), Memorial Day (Last Monday in May), Independence Day (July 4th), Labor Day (1st Monday in September), Thanksgiving Day (4th Thursday in November), Day after Thanksgiving (4th Friday in November), Christmas Eve (December 24th), Christmas Day (December 25th). City Hall will close at Noon on New Year's Eve (December 31st) when the holiday falls during the work week.
	The Library will be closed on the following recognized holidays: New Year's Day (January 1st), Easter Sunday, Memorial Day (Last Monday in May), Independence Day (July 4th), Labor Day (1st Monday in September), Thanksgiving Day (4th Thursday in November), Day after Thanksgiving (4th Friday in November), Christmas Eve Day (December 24th), and Christmas Day (December 25th).

Bereavement Leave	When a member of an employee's immediate family (spouse/domestic partner, mother, father, son, daughter, brother or sister including like step relations) dies, the employee is allowed up to three days off without loss of pay.  When a member of an employee's extended family (grandmother, grandmother-in-law, grandfather, grandfather-in-law, grandchild, son-in-law, daughter-in-law, mother-in-law, father-in-law, sister-in-law, or brother-in-law including like domestic partner or step relations) dies, the employee is allowed one day off without loss of pay.
Family Medical Leave (W/FMLA)	All employees who meet the eligibility requirements of 1,250 hours worked in the preceding 12 months (FMLA) and/or 1,000 hours worked in the preceding year (WFMLA) are eligible for up to 12 weeks of unpaid, job-protected leave each calendar year for specified family and medical reasons.
Military Leave	Employees will be granted a military leave without pay if she/he leaves the service of the City to join the military service of the United States during a time of war, other national emergency, or as otherwise required by applicable law. Military leave is applicable until released from military obligation.
	An employee who, by reason of membership in the United States Military Reserve or National Guard, is ordered by the appropriate authorities to attend training under the supervision of the United States Armed Forces shall be granted a leave of absence from her/his position for a period not to exceed two work weeks in any calendar year.
Jury Duty	Employees who are called upon for jury duty, or as a court witness under summons or subpoena, will receive full pay for any regular hours of work missed as a result of such service (maximum of eight hours per day).
Voting	Employees will be permitted to be absent from work to vote in accordance with state law. Time off to vote is unpaid unless the employee chooses to use vacation or compensatory time.